

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105839

FILED
Apr 29, 2006
Secretary of State

Entity Name: DANIA DENTAL LABORATORY INC.

Current Principal Place of Business:

15200 S. TAMiami TRAIL
SUITE 116
FORT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

15200 S. TAMiami TRAIL
SUITE 116
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 20-0298470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOTTEN, JEREMY J
17595 TAMiami TRAIL
SUITE 23
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: MERCER, AURORA H
Address: 9701 KEEL CT
City-St-Zip: FORT MYERS, FL 33919

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: MERCER, AURORA H
Address: 11133 SIERRA PALM COURT
City-St-Zip: FORT MYERS, FL 33912

Title: VP () Change (X) Addition
Name: MERCER, HARTY B
Address: 11133 SIERRA PALM COURT
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AURORA H MERCER

PR

04/29/2006

Electronic Signature of Signing Officer or Director

_____ Date